

ABORTION: A SOCIAL WORK STUDY

by

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DEDICATED TO MY FAMILY:

MY PARENTS: JOHANNES AND MARIA

MY CHILDREN: TUMISANG, KEFILWE AND GORATILEONA

MY SISTERS: TSHOLOFELO AND SARA

MY BROTHERS: LOUIS AND JIMMY

MY BROTHER-IN-LAW: KABELO

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SUMMARY

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The aim of the study was to explore and describe the psychological aspects of abortion in the women. Both quantitative and qualitative research approaches were used. The exploratory and descriptive research designs were used, because little information was available on the topic. The specific research objectives were intervention with women who opt for termination of pregnancy.

The quantitative phase was a data collection method that involved a survey phase of the study. The quantitative research was conducted on a person-to-person basis. The purposive sampling method was used to draw a sample, and a sample of thirty (30) women who were at GaRankuwa Hospital, Termination of Pregnancy (TOP) clinic.

For the qualitative phase of the study, interviews were conducted with women who were interviewed and reviewed. The data were analysed using content analysis which appeared to identify a number of psychological aspects of the women. The findings of the study are discussed and conclusions are drawn from the sample.

The medical aspects of termination of pregnancy are reviewed with an emphasis on the methods of termination and the various complications of pregnancy, abortion, and the various complications of the procedure and complications, as well as the prevention of complications.

The psychological aspects of termination of pregnancy are reviewed with an emphasis on the factors leading to the decision to abort, the psychological and emotional reactions, an emphasis on the psychological aspects and reactions as well as counselling.

There followed the legal aspects of termination of pregnancy, with an emphasis on the constitutional abortion policies and the legal framework of the study.

SUMMARY

ABORTION: A SOCIAL WORK STUDY

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Promoter : Dr. C.L. Carbonatto
Degree : DPhil (Social Work)

The aim of this study was to explore and describe the psychosocial aspects of abortion on the woman. Both qualitative and quantitative research approaches were used. The exploratory and descriptive research designs were used, because little information was available on the topic under study, specifically social work intervention with women who opt for termination of pregnancy.

A questionnaire was used as a data collection method for the quantitative phase of the study. The questionnaires were administered by the researcher on a person-to-person basis. The purposive sampling method was used to draw a sample, and a sample of eighty (80) women was drawn at Kalafong Hospital, Termination of Pregnancy (TOP) Clinic.

For the qualitative phase of the study thirty five (35) abortion files were selected and reviewed. These files were selected from the files of women who requested termination of pregnancy at the Women's Choice Clinic in Pretoria. The simple random sampling method was used to draw the sample.

The medical aspects of termination of pregnancy were discussed, with the emphasis on the methods of termination of pregnancy at different periods of gestation; abortion-related risks and complications and the management of complications, as well as the prevention of complications.

The psychosocial aspects of termination of pregnancy were then discussed, with the emphasis on factors leading to unwanted and unplanned pregnancies; emotional reactions to an unplanned and unwanted pregnancy; adolescents and abortion as well as counselling.

Then followed the legal aspects of termination of pregnancy, with emphasis on the international abortion policies and an in-depth discussion of the South

African abortion policy, namely Choice on Termination of Pregnancy Act 92 of 1996.

The findings from the quantitative phase were then presented graphically and discussed. It was confirmed from the study that termination of pregnancy is accompanied by a variety of implications. The major reason for women to opt for termination of pregnancy is financial problems. Women from all religious backgrounds request termination of pregnancy.

It was revealed that termination of pregnancy during the first trimester lessens the occurrence of complications, whereas, termination of pregnancy during the second trimester puts the women at risk of complications.

The provision of the Choice on Termination of Pregnancy Act (92 of 1996), on the non-mandatory counselling services leads to non-provision of counselling at the state abortion facilities. This results in women who opt for abortion at state abortion facilities not receiving a comprehensive service, which could have devastating consequences on their lives.

The social worker as the provider of psychosocial service needs to be a part of the medical team that renders the abortion service, on a full-time basis, so that all the aspects related to termination of pregnancy could be attended to at a one-stop service facility.

The bio-psychosocial model was found to be the appropriate one to use when rendering the abortion services, for the women to be provided with a comprehensive service, as all the psychosocial aspects of their situation will be taken into consideration.

Lastly, the guidelines for social work intervention at the TOP Clinic are provided, based on the findings from the study.

OPSOMMING

ABORSIE: 'n MAATSKAPLIKEWERKSTUDIE

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Departement : Maatskaplike Werk: Universiteit van Pretoria
Promotor : Dr. C.L. Carbonatto
Graad : DPhil (Maatskaplike Werk)

Die doel van hierdie studie was om die psigososiale aspekte van aborsie vir die vrou te verken en te beskryf. Beide kwalitatiewe en kwantitatiewe navorsingsbenaderings is benut vir die studie. Die verkennende en beskrywende navorsingsontwerpe is gebruik, omdat baie min kennis oor hierdie onderwerp beskikbaar is, spesifiek maatskaplike intervensie ten opsigte van vroue wat kies om 'n aborsie te ondergaan.

'n Vraelys is gebruik as die datainsamelingsmetode vir die kwantitatiewe fase van die studie. Die navorser het die vraelys deur die respondente op 'n persoon-tot-persoon basis laat voltooi. Die doelgerigte steekproeftrekkingsmetode is gebruik om die steekproef van tagtig (80) vroue by Kalafong Hospitaal se Aborsie Kliniek te trek.

Vir die kwalitatiewe fase van die studie is vyf –en- dertig (35) aborsie gevalle geselekteer en pasiënteleërs hersien by die Women's Choice Clinic te Pretoria. Die eenvoudige ewekansige steekproefnemingsmetode is benut om die steekproef te trek.

Die mediese aspekte van aborsie is bespreek, met klem op die metode van aborsie tydens verskillende trimesters van die swangerskap; die risiko wat verband hou met aborsie en hoe dit behandel is, sowel as die voorkoming van risiko.

Die psigososiale implikasies wat gepaard gaan met aborsie is bespreek, met klem op die faktore wat met 'n onbeplande en onwelkome swangerskap verband hou; die emosionele reaksies op 'n onbeplande swangerskap; adolessente en aborsie sowel as begeleiding.

Daarna is die wetlike aspekte van aborsie bespreek, met klem op die internasionale beleide en indiepte bespreking van die Suid-Afrikaanse

aborsiebeleid, naamlik, die Wet op Keuse oor die Beëindiging van Swangerskap (92/1996).

Die bevindinge van die kwantitatiewe fase is grafies voorgestel en daarna bespreek. Dit is bevestig dat die beëindiging van swangerskap met psigososiale implikasies gepaard gaan. Die hoof motivering vir die vroue om die beëindiging van swangerskap te kies, is finansiële probleme. Vroue van al die gelowe versoek beëindiging van swangerskap.

Die studie het aan die lig gebring dat aborsie gedurende die eerste trimester van die swangerskap nie met komplikasies gepaard gaan nie, terwyl dit gedurende die tweede trimester van die swangerskap baie komplikasies inhou.

Aangesien begeleiding van vroue wat aborsie ondergaan nie deur die Wet op Keuse oor die Beëindiging van Swangerskap (92/1996) afgedwing word nie, ontvang hierdie vroue dus nie so 'n diens nie. Dit veroorsaak dat die vroue wat 'n aborsie by veral staatsfasiliteite ondergaan nie 'n omvattende diens ontvang.

Die maatskaplike werker as die verskaffer van die psigososiale diens moet op 'n voltydse basis inskakel by die mediese span wat die aborsiediens lewer. Sodoende sal al die aspekte wat verband hou met aborsie by 'n een-stop diensfasiliteit aangespreek word.

Die bio-psigososiale model is bevind om die geskikste model te wees wat gebruik kan word wanneer die aborsiedienste gelewer word, sodat omvattende aborsiedienste aan vroue gelewer word.

INDEX

KEY CONCEPTS

ENGLISH

Abortion
 Unplanned pregnancy
 Termination of pregnancy
 Social functioning
 Psychosocial
 Health care
 Family planning
 Multi-disciplinary team
 Bio-psychosocial model
 Counselling
 Social work intervention

AFRIKAANS

Aborsie
 Onbeplande swangerskap
 Beëindiging van swangerskap
 Maatskaplike funksionering
 Psigososiale
 Gesondheidsorg
 Gesinsbeplanning
 Multi-dissiplinere span
 Bio-psigososiale model
 Beraad
 Maatskaplike werk intervensie

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